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933P The impact of patients' and physicians' characteristics on surgery decision for head and neck cancer: Results of a national survey

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Background: The choice between surgical or medical treatments in head and neck cancer is a function of many patient-related and disease-related factors. We investigated how physicians' behavioural characteristics and patients' socioeconomic status could affect medical decision-making between surgical or non-surgical treatment.

Methods: A nationwide cross-sectional online survey of surgeons, medical and radiation oncologists specialized in head and neck oncology collected data on medical decision-making for 7 clinical vignettes involving head and neck squamous cell carcinoma patients that were representative of routine practice. Questionnaires elicited physicians' demographic and occupational characteristics along with their individual behavioural characteristics according to the decision theory framework. Patients' gender and socioeconomic position were distributed across vignettes using a Latin square design.

Results: We obtained 206 assessable answers. A multivariate analysis showed that surgeons suggested surgery more often than other professionals, which is mostly related to vignettes corresponding to clinical cases for which there is no consensus. Oncologists are 68% less likely than surgeons to choose surgery. For clinical vignettes,

with an absence of consensus, physicians with lower risk aversion more often recommended surgery compared to those with higher risk aversion (OR=1.88, $P=0.052$). When the vignette corresponded to a clinical case for which there is a surgical consensus decision, the unmarried male manual worker has a 75% lower chance of being offered surgery compared to the married male small business owner (OR=0.25, $P=0.024$). We did not observe any differences based on the gender of the patient.

Conclusions: Patients' socioeconomic status did affect clinical management decisions in head and neck oncology. The significant association between medical decision and individual behavioural characteristics of the physician documented still understudied mechanisms that involved nonbiological factors to variations in clinical practice.

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